	in this information to	, ,								
Det	otor 1	Jennifer E. F	Ross			_				
	otor 2 ouse, if filing)					_				
Uni	ted States Bankrup	tcy Court for the	: SOUTHERN DISTRIC	CT OF OHIO		_				
Cas	se number 2:1	4-bk-55853					Check if this is	:		
(If kr	nown)			-			An amende	ed filing		
							☐ A supplem 13 income		ng postpetition following date:	chapter
0	fficial Form	<u> 1061</u>					MM / DD/ \	YYYY		
S	chedule I: `	Your Inco	ome							12/15
sup spo atta	plying correct info use. If you are sep ch a separate shee	ormation. If you parated and you	sible. If two married peo are married and not filii r spouse is not filing wi On the top of any additi	ng jointly, and your sith you, do not include	pouse i le infori	is livin	g with you, incl about your sp	ude infor ouse. If m	mation about nore space is	your needed,
1.	Fill in your emploinformation.	oyment		Debtor 1			Debtor 2	2 or non-	filing spouse	
	If you have more attach a separate information about	page with	Employment status	■ Employed			☐ Empl	☐ Employed		
			Employment status	☐ Not employed			☐ Not e	mployed		
	employers.		Occupation	Consultant						
	Include part-time, self-employed wo		Employer's name	State of Ohio						
	Occupation may in or homemaker, if		Employer's address	30 E. Broad St 28th Floor Columbus, OH 4	3215					
			How long employed t	here? 3 years						
Par	t 2: Give Det	tails About Mor	thly Income							
	!	ome as of the da	ate you file this form. If	you have nothing to re	port for	any lin	e, write \$0 in the	space. Ir	nclude your nor	n-filing
	u or your non-filing e space, attach a se		ore than one employer, co this form.	ombine the information	for all e	employ	ers for that perso	on on the	lines below. If y	you need
						F	or Debtor 1		ebtor 2 or ling spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$_	6,798.13	\$	N/A	
3.	Estimate and list	t monthly overti	ime pay.		3.	+\$_	0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$_	6,798.13	\$_	N/A_	

Debto	or 1	Jennifer E. Ross	_	Case	number (if known)	2:14-bk-55	5853	
				Foi	Debtor 1	For Debto		
	Car	by line 4 hore	4.	\$	6 700 42	non-filing		
	Cop	by line 4 here	4.	Φ_	6,798.13	Φ	N/A	-
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,189.67	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	951.74	\$	N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	_
	5e.	Insurance	5e.	\$_	242.49	\$	N/A	=
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	-
	5h.	Other deductions. Specify: Flexsave Ee	5h.+	\$_ \$	145.17	· · · · · · · · · · · · · · · · · · ·	N/A	-
		Union Computer Purchase Program	_	Ť-	23.18	\$	N/A	-
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	2,552.25	\$	N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	4,245.88	\$	N/A	-
8.	List	all other income regularly received:						
	8a.	Net income from rental property and from operating a business,						
		profession, or farm Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$-	0.00	· · · <u></u>	N/A	-
	8e.	Social Security	8e.	\$_	0.00	\$	N/A	-
	8f.	Other government assistance that you regularly receive		*-	0.00	<u> </u>		-
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.)					
		Specify:	8f.	\$_	0.00	\$	N/A	_
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	-
	8h.	Other monthly income. Specify:	8h.+	\$_	0.00	+ \$	N/A	-
9.	Δdd	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
0.	Auc	Tall other moonie. Add lines out obtocroat octorrogram.	٥.		0.00	· L	11/7	
10	Cal	aulate manthly income. Add line 7 L line 0	10 6		4,245.88 + \$	NI/A		4 24E 00
		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		4,245.88 + 5	N/A	<u>-</u>	4,245.88
	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. In the contribution of the	depen		•	•	ıle .l	
	_	cify:					+\$	0.00
						_		
		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					\$	4,245.88
							Combin	ned
46	_		•				monthl	y income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	1					

Yes. Explain: Note: Business income is not listed on Schedule I as Debtor does not do this on a regular basis.

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Fill	in this info	ormation to identify yo	our case:							
Deb	tor 1	Jennifer E. F	Ross			Ch	neck	if this is:		
		Octimies E. i	1000				Α	n amended filing		
Deb	tor 2						Α	supplement show	ving postpetition chapte	er
(Spo	ouse, if filing	g)				_		3 expenses as of t		
Unit	ed States B	Bankruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO			N	MM / DD / YYYY		
Cas	e number	2:14-bk-55853								
	nown)									
Of	fficial	Form 106J								
Sc	chedu	ıle J: Your	Exper	ises					1:	2/15
Be info nur	as complormation. mber (if ki	ete and accurate as If more space is ne nown). Answer eve	s possible eded, atta ry questio	. If two married people ar ch another sheet to this t						
Par 1.		escribe Your House joint case?	enoia							
٠.		So to line 2.								
		Does Debtor 2 live	in a conar	ata hausahald?						
			iii a sepai	ate nousenoid:						
		□ No □ Yes, Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate Househ	old of D	≏ht∩	ır 2		
		1 103. Debtor 2 ma	or me ome	air oini 1000 2, <i>Expenses</i>	Tor Ocparate Housen	ioid of D	CDIO	· · · ·		
2.	Do you	have dependents?	■ No							
	Do not li Debtor 2	st Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2			Dependent's age	Does dependent live with you?	
	Do not s	tate the							□ No	
	depende	ents names.							☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
2	De wew	, avnancas includa	_						☐ Yes	
3.	expense yourself	expenses include es of people other t f and your depende	han ents?	No Yes						
		stimate Your Ongoi			di t			mlamant !:: - C!	mtan 40 aas - 1	
exp		of a date after the		uptcy filing date unless y y is filed. If this is a supp						
				government assistance if						
	value of s ficial Forr		nd have inc	cluded it on Schedule I: Y	our Income		_	Your expe	enses	
4.		tal or home owners ts and any rent for th		ses for your residence. In	nclude first mortgage	4.	\$		1,300.00	
	If not in	cluded in line 4:								
	4a. R	eal estate taxes				4a.	\$		0.00	
	4b. Pr	roperty, homeowner's	s, or renter	's insurance		4b.	\$		0.00	
		ome maintenance, re				4c.	- :		100.00	
_		omeowner's associa				4d.			0.00	
5.	Addition	nai mortgage paym	ents for yo	our residence , such as hor	me equity loans	5.	\$		0.00	

Debt	or 1	Jennifer E. Ross	Case num	ber (if known)	2:14-bk-55853			
6.	Utiliti	ios:						
-	6a.	Electricity, heat, natural gas	6a.	\$	244.35			
	6b.	Water, sewer, garbage collection	6b.		58.96			
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	202.07			
	6d.	Other. Specify:	6d.	·	0.00			
		I and housekeeping supplies	7.	·	300.00			
		Icare and children's education costs	8.		0.00			
		ning, laundry, and dry cleaning	9.		75.00			
		onal care products and services	10.		75.00			
		cal and dental expenses	11.	*				
		sportation. Include gas, maintenance, bus or train fare.	11.	Ψ	100.00			
		ot include car payments.	12.	\$	150.00			
		rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00			
		itable contributions and religious donations	14.		0.00			
		rance.		<u> </u>	0.00			
-		of include insurance deducted from your pay or included in lines 4 or 20.						
		Life insurance	15a.	\$	0.00			
	15b.	Health insurance	15b.	\$	0.00			
	15c.	Vehicle insurance	15c.	\$	756.00			
	15d.	Other insurance. Specify:	15d.	\$	0.00			
		s. Do not include taxes deducted from your pay or included in lines 4 or 20.		·				
	Spec		16.	\$	0.00			
17.	Insta	Ilment or lease payments:						
	17a.	Car payments for Vehicle 1	17a.	\$	334.50			
	17b.	Car payments for Vehicle 2	17b.	\$	0.00			
	17c.	Other. Specify:	17c.	\$	0.00			
	17d.	Other. Specify:	17d.	\$	0.00			
18.	Your	payments of alimony, maintenance, and support that you did not report as						
	dedu	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00			
19.	Othe	r payments you make to support others who do not live with you.		\$	0.00			
	Spec	·	19.					
		r real property expenses not included in lines 4 or 5 of this form or on Sche						
	20a.	Mortgages on other property	20a.		0.00			
	20b.	Real estate taxes	20b.	\$	0.00			
	20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00			
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00			
	20e.	Homeowner's association or condominium dues	20e.	\$	0.00			
21.	Othe	r: Specify:	21.	+\$	0.00			
00	C-1	ulata vasuu manthilu avusanaa						
		ulate your monthly expenses			2 225 22			
		Add lines 4 through 21.		\$	3,695.88			
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$				
	22c. /	Add line 22a and 22b. The result is your monthly expenses.		\$	3,695.88			
23	Calc	ulate your monthly net income.						
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,245.88			
		Copy your monthly expenses from line 22c above.	23b.		3,695.88			
	_00.	Copy your monthly expended from the 220 above.	200.		3,033.00			
	23c	Subtract your monthly expenses from your monthly income.						
	200.	The result is your <i>monthly net income</i> .	23c.	\$	550.00			
	Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a							
		cample, do you expect to linish paying for your car loan within the year or do you expect you ication to the terms of your mortgage?	i mortgage	payment to micre	ase of decrease because of a			
	■ No							

nodification to the terms of your mortgage?					
No.					
☐ Yes.	Explain here:				